## SITE REMEDIATION PROFESSIONAL LICENSING BOARD AUDIT QUESTIONNAIRE

You have been randomly chosen by the Site Remediation Professional Licensing Board (SRPLB) to be audited for your work as a Licensed Site Remediation Professional (LSRP) in accordance with the Site Remediation Reform Act, N.J.S.A. 58:10C-24 (SRRA), which states:

The Board shall audit annually the submissions and conduct of at least 10 percent of the total number of Licensed Site Remediation Professionals. A Licensed Site Remediation Professional and the person responsible for conducting the remediation shall cooperate with the Board in the conduct of the audit and shall provide any information requested by the Board as part of the audit.

Please complete this entire questionnaire and return to the SRPLB office at the address stated below, on Page 6, along with any supporting or requested documentation within **30** days of receipt. An electronic submission of supporting or requested documentation is preferred, but not mandatory. If you cannot return this form within **30** days of receipt, you must provide the SRPLB-Audit Committee a written explanation of the reasons within **15** days of receipt. *If you do not respond as required, the SRPLB shall temporarily suspend your license.* You will be notified in writing of the findings of this audit and may receive questions or comments from the Audit Team. *Pursuant to SRRA*, *your cooperation is mandatory*.

Please print legibly or type.	
Date:	
Name:	LSRP Number:
Home Address:	
City, State, Zip Code:	
Current Employer:	
Employer Address:	
City, State, Zip Code:	<u></u>
Email Address:	

	RPLB will contact you by email and U.S. Mail Service. At which mailing address do you to receive mail:businesshome?
	is the date of your LSRP Approval or most recent renewal ( <i>not most recent annual yment</i> )?:
<b>BECO</b>	OF THE FOLLOWING QUESTIONS ARE BASED UPON YOUR CONDUCT SINCE MING LICENSED AS A LICENSED SITE REMEDIATION PROFESSIONAL AND YOUR MOST RECENT AUDIT.
	AND ALL QUESTIONS REFERRING TO " <i>YOU</i> " REFERS TO YOU AS AN INDIVIDUAL, YOUR EMPLOYER OR CLIENT.
A.	<u>LEGAL AND DISCIPLINARY HISTORY</u> (The following questions apply to the entire United States, not just New Jersey)
1.	Have you been disbarred, suspended, reprimanded, censured or otherwise disciplined as a member of any profession or holder of any public office, or have you voluntarily surrendered a professional license? NoYes If "Yes", explain the circumstances on a separate page.
2.	Have you been convicted of, or plead guilty to, an environmental crime, or any similar or related criminal offense under Federal or State law, or any crime involving fraud, theft by deception, forgery, or related criminal offense under Federal or State law? (N.J.S.A. 58:10C-7.d.(6)).
3.	Has there been a judgment against you for malpractice or negligence related to the remediation of contaminated sites? NoYes If "Yes", explain the circumstances on a separate page.
В.	LSRP SUBMISSIONS AND CODE OF CONDUCT (Any documents submitted since your last audit may be reviewed as part of this audit).
1.	For how many sites have you been retained as LSRP? (Attach a list of all the sites you have been retained as an LSRP, include site name, address, City, and New Jersey Department of Environmental Protection (NJDEP) Program Interest (PI) Number, client name and contact information including telephone number and address, facility type, phase of remediation (PA, SI, RI or RA), RAO issued and date, Site-Wide or RAO only retention, and additional notes relative to your scope of retention). Please include required information on a separate page.
2.	Have you submitted any documents to NJDEP as an LSRP, (i.e., Regulated UST, Child Care Facility, School Facility, ISRA, Landfill, Coal Gas, Spill Act Discharge) aside from the LSRP Retention Form?NoYes

3.	Please provide site name, address, and information, and facility type, (i.e., Regula	RAO) have you issued in the past 3 years? I NJDEP PI No., client name and contact ted UST, Child Care Facility, School Facility, ge). Please include required information on a	
4.	Has the NJDEP invalidated any response aNoYes If "Yes", explaincluding the PI#, Responsible Party and re	in the circumstances on a separate page,	
5.	<ol> <li>Which do you consider your area of technical and/or regulatory knowledge? (check all that apply).</li> </ol>		
	ARRCS (N.J.A.C. 7:26C) Brownfields Child Care Facility Chrome Site Coal Gas Engineering Fate & Transport modeling Federal Oversight (RCRA, CERCLA, etc) Geochemistry Geology	HydrogeologyISRA (Regulation N.J.A.C. 7:26B)LandfillPreliminary AssessmentRemedial ActionRemedial InvestigationSRRA (N.J.S.A. 58:10C-1 et seq.)Site InvestigationTechnical Regulations (N.J.A.C. 7:26E)UST (Regulation N.J.A.C. 7:14B)	
6.	6. Has a client ever released you (voluntarily or involuntarily) as an LSRP, or have you ever withdrawn as an LSRP for a particular remediation prior to the issuance of a response action outcome for the site or area of concern (N.J.S.A. 58:10C-16d)? NoYes If "Yes", explain the circumstances on a separate page, include site name, address, and NJDEP PI No., client name and contact information, and the circumstances surrounding the release.		
7.	performed under the supervision of anothe 58:10C-16f).	ise of remediation based on remediation worker LSRP in accordance with SRRA? (N.J.S.A. the circumstances on a separate page.	
8.	Section 16 of SRRA? (N.J.S.A. 58:10C-16r	circumstances on a separate page, including	

## **CERTIFICATION OF COMPLIANCE WITH CODE OF CONDUCT**

hereby certify that:	
<ol> <li>I have read the LSRP Code of Conduct, stated in SRRA Section 16; and</li> <li>Except as described below, to the best of my knowledge and belief, I have complied with the Code of Conduct at all times.</li> </ol>	
Certified: Signature of LSRP	
UPDATE OF PREVIOUS PERSONAL INFORMATION CONCERNING YOUR LSRP LICENSE	
On a separate sheet of paper, please provide any corrections or updates that are necessary for your application for licensure as an LSRP. (Such as change of employment or mailing address).	
C. CONTINUING EDUCATION	
List three (3) most recent courses or seminars you have attended, related to site remediation activities and your environmental profession, which were offered by NJDEP, an accredited university, professional organization or other Federal or State agency.	
Course Name Affiliation Location Date Total Number of Hours Attended	
D. <u>HEALTH AND SAFETY</u>	
Please submit a copy of your most recent OSHA 8-Hour Refresher Certificate.	
Is your OSHA 8-hour Refresher up to date? YesNo. If "No", explain the circumstances on a separate page.	

## F. AFFIDAVIT

This affidavit is to be executed by the LSRP before a notary public:
State of:
County of:
I,
I further swear (or affirm) that I have read SRRA (N.J.S.A. 58:10C-1 et seq.) and fully understand that by holding a Site Remediation Professional License, I am bound by the requirements of SRRA.
Furthermore, in accordance with Section 24 of SRRA, I voluntarily consent to an audit by the SRPLB and a thorough investigation of my past and present employment and other activities for the purpose of verifying my remediation submissions and adherence to the Code of Conduct (N.J.S.A. 58:10C-16). I further authorize all institutions, employers, agencies and all governmental agencies and instrumentalities (local, State, Federal and foreign) to release any information, files or records requested by the SRPLB.
Finally, I understand that knowingly providing inaccurate information or declining to participate in the audit shall result in disciplinary action and may result in the suspension or revocation of my license.
LSRP Signature
LSRP Number
Sworn and subscribed to me this
day of
Month
Name of Notary Public (please print)  Affix Stamp Here
Signature of Notary Public
Poturn via Cartified Mail or Overnight with tracking to:

Return, via Certified Mail or Overnight with tracking, to:

Site Remediation Professional Licensing Board c/o New Jersey Department of Environmental Protection/Site Remediation Program Office of Assistant Commissioner PO Box 420; Mailcode 401-06 401 East State Street Trenton, New Jersey 08625-0420 Attn: Audit Committee

Electronic Submissions and Questions can be forwarded to the attention of the Audit Committee at: <a href="mailto:srplboardcontact@dep.state.nj.us">srplboardcontact@dep.state.nj.us</a>